## **SENATE MOTION**

## **MADAM PRESIDENT:**

I move that Engrossed House Bill 1320 be amended to read as follows:

1	Page 4, between lines 26 and 27, begin a new paragraph and insert:
2	"SECTION 3. IC 12-15-15-1.6 IS ADDED TO THE INDIANA
3	CODE AS A <b>NEW</b> SECTION TO READ AS FOLLOWS [EFFECTIVE
4	JULY 1, 2003 (RETROACTIVE)]: Sec. 1.6. (a) This section applies
5	only if the federal Centers for Medicare and Medicaid Services
6	determines that payments made under section 1.5(b) STEP FIVE
7	(A), (B), or (C) of this chapter are not eligible for federal financial
8	participation.
9	(b) If the federal Centers for Medicare and Medicaid Services
10	determines that payments made under section 1.5(b) STEP FIVE
11	(A) of this chapter are not eligible for federal financial
12	participation, the office may make an alternative payment to a
13	payment under section 1.5(b) STEP FIVE (A) of this chapter if:
14	(1) the payments for a state fiscal year are made only to a
15	hospital that would have been eligible for a payment for that
16	state fiscal year under section 1.5(b) STEP FIVE (A) of this
17	chapter; and
18	(2) the payments for a state fiscal year to each hospital are
19	an amount that is as equal as possible to the amount each
20	hospital would have received under section 1.5(b) STEP FIVE
21	(A) of this chapter for that state fiscal year.
22	(c) If the federal Centers for Medicare and Medicaid Services
23	determines that payments made under section 1.5(b) STEP FIVE
24	(B) of this chapter are not eligible for federal financial
25	participation, the office may make an alternative payment to a
26	payment under section 1.5(b) STEP FIVE (B) of this chapter if:
27	(1) the payments for a state fiscal year are made only to a
28	hospital that would have been eligible for a payment for that
29	state fiscal year under section 1.5(b) STEP FIVE (B) of this

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1	chapter; and
2	(2) the payments for a state fiscal year to each hospital are
3	an amount that is as equal as possible to the amount each
4	hospital would have received under section 1.5(b) STEP FIVE
5	(B) of this chapter for that state fiscal year.
6	(d) If the federal Centers for Medicare and Medicaid Services
7	determines that payments made under section 1.5(b) STEP FIVE
8	(C) of this chapter are not eligible for federal financial
9	participation, the office may make an alternative payment to a
10	payment under section 1.5(b) STEP FIVE (C) of this chapter if:
11	(1) the payments for a state fiscal year are made only to a
12	hospital that would have been eligible for a payment for that
13	state fiscal year under section 1.5(b) STEP FIVE (C) of this
14	chapter; and
15	(2) the payments for a state fiscal year to each hospital are
16	an amount that is as equal as possible to the amount each
17	hospital would have received under section 1.5(b) STEP FIVE
18	(C) of this chapter for that state fiscal year.
19	(e) If the federal Centers for Medicare and Medicaid Services
20	determines that payments made under subsection (b), (c), or (d)
21	are not eligible for federal financial participation, the office shall
22	use the funds that would have served as the non-federal share of
23	these payments for a state fiscal year to serve as the non-federal
24	share of a payment program for hospitals to be established by the
25	office. The payment program is for the benefit of hospitals and
26	must distribute payments for a state fiscal year based upon a
27	methodology determined by the office to be equitable under the
28	circumstances.".
29	Renumber all SECTIONS consecutively.
	(Reference is to EHB 1320 as printed February 13, 2004.)

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Senator MILLER